

Charity Street Collections

Form of Statement



Name of person to who the permit was granted (in block letters).....

Address of person to whom permit was granted (in block letters).....

.....

.....

Name of Charity or fund which is to benefit (in block letters)

Date of Collection

Please Show Nil Entries

Proceeds of Collection		Expenses and Application of Proceeds	
	£ p		£ p
From collecting boxes		Printing and stationery	
		Postage	
		Advertising	
		Badges	
Interest on proceeds		Collecting boxes	
		Emblems	
Other items (if any):		Other items (if any):	
.....		
.....		
		Payments approved under Regulation 15 (2)	
		Disposal of Balance to Charity (insert particulars)	
Total *	£	Total *	£

***These totals must balance - Please Show Nil Entries**

CERTIFICATE OF PERSON TO WHOM THE PERMIT WAS GRANTED

I certify that to the best of my knowledge and belief the above is a true account of the proceeds, expenses and application of the proceeds of the collection.

Date.....

Signed.....

CERTIFICATE OF ACCOUNTANT

I certify that I have obtained all the information and explanations required by me and that the above is in my opinion a true account of the proceeds, expenses and application of the proceeds of the collection.

Date.....

Signed.....

Qualifications